## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P99000051632

Country

6. Name and Address of Current Registered Agent

OFFICERS AND DIRECTORS

Suite, Apt. #, etc.

STOLL, HARRIET

2870 SABALWOOD COURT **DELRAY BEACH FL 33445** 

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

STOLL HARRIET

STOLL JASON

2870 SABALWOOD COURT

DELRAY BEACH FL 33445

2870 SABALWOOD COURT

**DELRAY BEACH FL 33445** 

(See criteria on back)

PTD

VSD

City & State

Zip

SIGNATURE

11.

TITLE

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STREET ADDRESS

STREET ADDRESS

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CITY-ST-7/P

CITY-ST-ZIP

CITY-ST-ZIP

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CITY-ST-ZIP

CITY-ST-ZIP

## STOLL-THE CUTTING EDGE INC.

Principal Place of Business : 1870 SABALWOOD COURT : 1870 SEACH FL 33445	Mailing Address 2870 Sabalwood Court Delray Beach Fl 33445-7153	
, , ,		
2 Principal Place of Business	3 Mailing Address	

Suite. Apt. #. etc.

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

Delete

☐ Delete

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12.

TITLE

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CITY-ST-ZIP

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CITY-ST-7IP

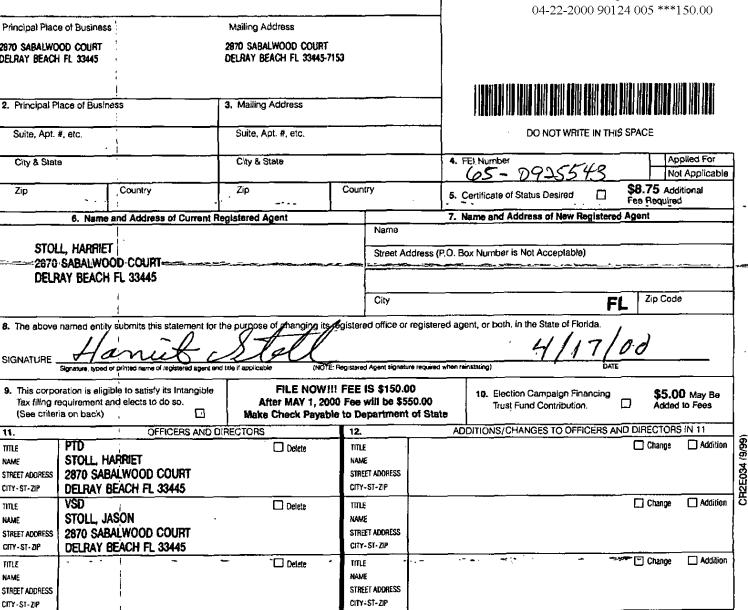
CITY-ST-7IP

CITY-ST-ZIP

City & State

Zip

FILED Jun 01, 2000 8:00 am Secretary of State



I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 20 or Block 12 if changed, or on an attachment with an address, with all other like empowered

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Change

☐ Change

☐ Change

☐ Addition

Addition

Addition